**Fall 2019 Academic Career Mobility Program-Nursing**

**Completed File Checklist**

**Deadline: March 1, 2019 by 4:00 pm**

All students who have attended a Pre-Admission Nursing Conference and applying to the Academic Career Mobility Program MUST submit a completed file. The completed file must be submitted to the Admissions & Records Office (Vanessa Thornsberry) by March 1st no later than 4 pm. The student must submit all required documentation listed below along with this checklist. The student should meet with Vanessa Thornsberry located in the Student Center on the Prestonsburg Campus of BSCTC. Ms. Thornsberry will review and sign the checklist after verification of the completed file. The student will be provided a copy of the signed checklist for their records. The original form will be retained by the Admissions Department and placed in the student’s file. If Ms. Thornsberry is unavailable please see the Dean of Student Services, Mr. Jimmy Wright, for further instruction. Please do NOT submit any documentation to the Nursing Department or any other department of the College. The student will assume all responsibility in the delivery of their completed file to Admissions & Records Office (Vanessa Thornsberry).

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PS ID or SS#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Material required for a completed Nursing file to be considered for Admission to the Nursing Program is as follows:

1. Attendance at a Pre-Admission Nursing Conference. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Official High School Transcript or GED. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Official Transcripts from all Post-Secondary Education or Training Facilities. \_\_\_\_\_\_\_\_\_

(This excludes any KCTCS College/School)

1. Results of the National ACT test. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Results of the TEAS Exam. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Kentucky State Registry for Nurse Aide License number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I verify that I have reviewed my file for the ACADEMIC CAREER MOBILITY program with the Admissions & Records Office on the BSCTC Prestonsburg Campus. Upon singing this form I agree my file is considered complete at this time. Any questions or concerns that I have regarding my file have been answered by the person who is assisting me.

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(Student Signature) (Date)

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(Admissions & Records Signature) (Date)